		RECORD	Form V	WWC-5			sion of Water	1		VIM-MIP-4			
		Correction		e in Well Use			irces App. No.		Well ID				
1 LOCATION OF WATER WELL:							ion Number	Township Numb					
County		SW1/4 SW1/4 NW1											
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distart													
								lirection from nearest town or intersection): If at owner's address, check here:					
	Address: 1900 E. 9th Street Address: 28							811 N Ohio. Waste Connections					
City:	Wichita		State: KS	ZIP: 67214	201114	J1110.	. Waste ooi	modiono					
3 LOCAT			····		l			07.7000					
WITH "		4 DEPTH	OF COM	IPLETED WELL:	15	ft.	5 Latitud	e: 37.7338	44	(decimal degrees)			
	SECTION ROX.   Depth(s) Groundwater Encountered: 1)!												
N	Į		2) ft. 3) ft., or 4) 🗆 I										
		1	WELL'S STATIC WATER LEVEL:				Bouree for Buttade Bong.						
'	J		above land surface, measured on (mo-day-yr				<b>315</b> (41111 1115114 1115241 111111111111111111						
NW	- NE		Pump test data: Well water was ft.				Land Survey Topographic Map			0)			
w	- $+$ $ +$ $ +$ $ +$ $ +$ $ +$ $ +$ $ +$ $  +$ $            -$	1	after hours pumpinggp				m Online Mapper:						
Wel				vater was ft.			Cinitie Mapper						
SW	SE	after	after hours pumping gp			A TI A NA A TIA A TIMOS							
	Estimated Y	Estimated Yield:gpm			6 Elevation: NA								
1	S	Bore Hole D	e Diameter: 3.25 in. to 15			it. and Surve ☐ Land Surve			GPS Topographic Map				
mile  in. to ft.													
7 WELL WATER TO BE USED AS:													
1. Domestic													
. —	☐ Lawn & Garden 7. ☐ Aquifer Re☐ Livestock 8. ■ Monitoring				-MIP-4	••••	Cased Uncased Geotechnical						
_	☐ Lawn & Garden ☐ Livestock  2. ☐ Irrigation  7. ☐ Aquifer Recharge: well ID  8. ■ Monitoring: well ID  9. Environmental Remediation: well												
	3. ☐ Feedlot ☐ Air Sparge ☐ Soil Var												
4. Industr							Other (specify):						
4. Industrial Recovery Injection 13. Other (specify):													
Water well disinfected?   Yes No													
8 TYPE OF CASING USED: Steel PVC Other													
Casing diameter 1 in to 8 ft Diameter in to 4 Diameter in to 4													
Casing diameter													
TYPE OF SCREEN OR PERFORATION MATERIAL:													
☐ Steel ☐ Stainless Steel ☐ Fiberglass ■ PVC ☐ Other (Specify)													
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)													
SCREEN OR PERFORATION OPENINGS ARE:													
☐ Continuous Slot ■ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)													
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)													
SCREEN-PERFORATED INTERVALS: From .8 ft. to .15 ft., From ft. to ft., From ft. ft. o ft.													
GRAVEL PACK INTERVALS: From													
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other.  Grout Intervals: From 6, ft. to 6, ft., From ft. to ft.													
Nearest source of possible contamination:													
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage													
Sewer			Cess Pool	☐ Sewage L ☐ Feedyard			uel Storage		loned Water V	Well			
☐ Watertight Sewer Lines     ☐ Seepage Pit     ☐ Feedyard     ☐ Fertilizer Storage     ☐ Oil Well/Gas Well       ☐ Other (Specify)													
Direction from well?													
10 FROM	ТО		ITHOLOG		FRON			THO. LOG (cont.) o		GINTERVALS			
0	1	Gravel			1.1.01	_							
	5	No recor	18 577										
	6.5	Clay, dark br	own. den	se, moist									
6.5	12.5		clay, tan, soft to firm, moist, silty						,				
12.5	15		and, light brown, fine to coarse, wet at			$\dashv$	<del></del>		<del></del>				
		14', petroleur				_							
						Notes:							
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged													
under my j	arisdiction a	and was compl	eted on (m	no-day-year) 3-16-2	2020 a	and th	his record is t	rue to the best of n	ıv knowleds	ge and belief.			
Kansas Wa	ter Well Co	ontractor's Lice	ense No. 6	04 This W	ater Well	Reco	ord was comp	leted on (mo-day-y	/ear) <b>≲./.</b> 1	5/20			
under the b	usiness nan	ne of Environ	mental Pi	riority Service. Inc.		Sigi	nature	tt mt		<b>/</b>			
Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.													
E .		<b>St., Suite 420, Top</b> ks.gov waterwell i		00012-1367. Mail one to	Water Well KSA 82a			for your records. Telep	none /85-296-	5524. <b>7/10/2015</b>			
visit us at fill	<u>i, www.kuncl</u>	<u>vs.gov waterwe</u> H t	uacx,numl		NOM OZE	1-141	4		17E A 12E G	111014013			